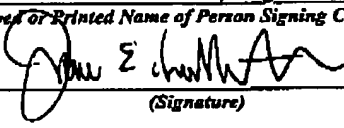
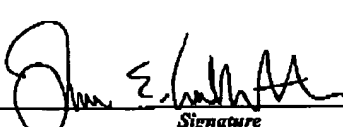


CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. L7725.04106
Applicant(s): C. WENGERTER et al.			
Application No. 10/501,906	Filing Date July 20, 2004	Examiner T. Ghebretinsae	Group Art Unit 2637
Invention: CONSTELLATION REARRANGEMENT FOR ARQ TRANSMIT DIVERSITY SCHEMES			
<p>I hereby certify that this <u>Amendment and Amendment Transmittal</u> (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>571-273-8300</u>) on <u>March 14, 2006</u> (Date)</p> <p><u>James E. Ledbetter, Reg. No. 28,732</u> (Type or Printed Name of Person Signing Certificate)  (Signature)</p> <p>Note: Each paper must have its own certificate of mailing.</p>			

RECEIVED
CENTRAL FAX CENTER
MAR 14 2006

BEST AVAILABLE COPY

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No.	
Applicant(s): C. WENGERTER et al.				L7725.04106	
Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/501,906	July 20, 2004	T. Ghebretinsae	24257	2637	8672
Invention: CONSTELLATION REARRANGEMENT FOR ARQ TRANSMIT DIVERSITY SCHEMES					
RECEIVED CENTRAL FAX CENTER MAR 14 2006					
COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	24 -	28 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature			Dated: March 14, 2006		
James E. Ledbetter, Reg. No. 28,732			<div>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div> <div>Signature of Person Mailing Correspondence</div> <div>Typed or Printed Name of Person Mailing Correspondence</div>		
CC:					

BEST AVAILABLE COPY

RECEIVED
CENTRAL FAX CENTER
MAR 14 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Inventor: C. WENGERTER et al. Group Art Unit: 2637
Appln. No.: 10/501,906 Examiner: T. Ghebretinsae
Filed: July 20, 2004
For: CONSTELLATION REARRANGEMENT FOR ARQ TRANSMIT
DIVERSITY SCHEMES

AMENDMENT UNDER 37 CFR § 1.111

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated December 14, 2005,
please amend the above-captioned application as follows:

BEST AVAILABLE COPY